

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>W G</i>		12/9/99
O.I.P.E. CLASSIFIER			12/13/99
FORMALITY REVIEW	<i>W G</i>	71480	12-21-99
RESPONSE FORMALITY REVIEW	<i>1</i>		

### INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)..... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	12/26/99
2	12/26/99
3	12/26/99
4	12/26/99
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50	12/26/99

Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
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